

Application Data Sheet

Application Information

Application Number:: Unassigned
Filing Date:: July 29, 2003
Application Type:: Regular
Subject Matter:: Utility
CD-ROM or CD-R:: None
Title:: CYCLOOXYGENASE-2 SELECTIVE INHIBITORS, COMPOSITIONS AND METHODS OF USE
Attorney Docket Number:: 102258.158US2
Request for Early Publication?:: No
Request for Non Publication?:: No
Total Drawing Sheets: 0
Small Entity?:: No
Petition Included?:: No
Secrecy Order in Parent Application?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.
Status:: Full Capacity
Given Name:: David
Middle Name:: S.
Family Name:: Garvey
City of Residence:: Dover
State or Province of Residence:: Massachusetts
Country of Residence:: U.S.
Street of mailing address:: 10 Grand Hill Drive
City of mailing address:: Dover

State or Province of mailing address:: Massachusetts
Country of mailing address:: U.S.
Postal or Zip Code of mailing address:: 02030

Applicant Authority Type:: Inventor
Primary Citizenship Country:: India
Status:: Full Capacity
Given Name:: Subhash
Middle Name:: P.
Family Name:: Khanapure
City of Residence:: Clinton
State or Province of Residence:: Massachusetts
Country of Residence:: U.S.
Street of mailing address:: 3.Colonial Drive
City of mailing address:: Clinton
State or Province of mailing address:: Massachusetts
Country of mailing address:: U.S.
Postal or Zip Code of mailing address:: 01510

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.
Status:: Full Capacity
Given Name:: Ramani
Middle Name:: R.
Family Name:: Ranatunge
City of Residence:: Lexington
State or Province of Residence:: Massachusetts
Country of Residence:: U.S.
Street of mailing address:: 11 Bates Road
City of mailing address:: Lexington
State or Province of mailing address:: Massachusetts
Country of mailing address:: U.S.

Postal or Zip Code of mailing address:: 02421

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Great Britain
Status:: Full Capacity
Given Name:: Stewart
Middle Name:: K.
Family Name:: Richardson
City of Residence:: Tolland
State or Province of Residence:: Connecticut
Country of Residence:: U.S.
Street of mailing address:: 55 Autumn Drive
City of mailing address:: Tolland
State or Province of mailing address:: Connecticut
Country of mailing address:: U.S.
Postal or Zip Code of mailing address:: 06084

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.
Status:: Full Capacity
Given Name:: Joseph
Middle Name:: D.
Family Name:: Schroeder
City of Residence:: Minneapolis
State or Province of Residence:: Minnesota
Country of Residence:: U.S.
Street of mailing address:: 2305 W. 52nd Street
City of mailing address:: Minneapolis
State or Province of mailing address:: Minnesota
Country of mailing address:: U.S.
Postal or Zip Code of mailing address:: 55410

Correspondence Information

Correspondence Customer Number:: 25270
Phone number:: 202-942-8400
Fax number:: 202-942-8484

Representative Information

Representative Customer Number::	25270	
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Nonprovisional	60/398,829	July 29, 2002

Assignment Information

Assignee Name:: NitroMed, Inc.
Street of mailing address:: 12 Oak Park Drive
City of mailing address:: Bedford
State or Province of mailing address:: Massachusetts
Country of mailing address:: U.S.
Postal or Zip Code of mailing address:: 01730